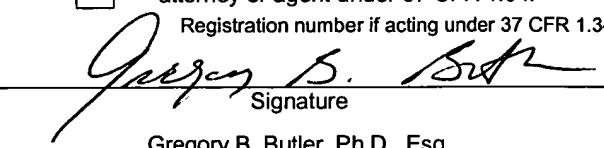




Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Docket Number (Optional) 59572(46865) |
|---|---|--|
| Application Number | 10/622,377-Conf. #9926 | Filed July 18, 2003 |
| For | TEST SYSTEM FOR THE DEVELOPMENT OF THERAPEUTIC AGENTS, IN PARTICULAR ACTIVE COMPOUNDS FOR THE TREATMENT OF OSTEOPOROSIS | |
| Art Unit | 1632 | Examiner J. Hama |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | |
| | Fee | Small Entity Fee |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1105</u> . I have enclosed a duplicate copy of this sheet. | | |
| I am the | <input type="checkbox"/> | applicant/inventor. |
| | <input type="checkbox"/> | assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). |
| | <input type="checkbox"/> | attorney or agent of record. Registration Number _____ |
| | <input checked="" type="checkbox"/> | attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ 34,558 |
|  Signature | | October 5, 2006 Date |
| Gregory B. Butler, Ph.D., Esq. Typed or printed name | | (617) 439-4444 Telephone Number |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | |
| <input type="checkbox"/> | Total of 1 forms are submitted. | |

10/13/2006 WABDELRI 00000025 041105 10622377

01 FC:1252 450.00 DA